



North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities
and Substance Abuse Services

325 North Salisbury Street • Raleigh, North Carolina 27603 • Courier #56-20-24
James B. Hunt, Jr., Governor
C. Robin Britt, Sr., Secretary

Michael S. Pedneau, Director
(919) 733-7011

Willie M. Section

ADMINISTRATIVE LETTER NO. 96-01

TO: Area Program Directors
Willie M. Coordinators

FROM: Marci White, Chief
Willie M. Section

DATE: January 2, 1996

RE: SECURE WAITING LIST, ASSESSMENT AND OUTCOME INSTRUMENTS (AOIs), and TREATMENT/HABILITATION PLANS (T/HPs)

PURPOSE and POLICY

As you know, you should be completing Assessment and Outcome Instruments (AOIs) for all **Willie M.** children shortly before their scheduled T/HPs. If a class member's needs are such that he now needs to receive services in a secure treatment setting and you are preparing a secure treatment referral, a new T/HP should be developed for that class member, reflecting the changes in his needs. The new T/HP should also include the services and supports to be provided in the interim before secure treatment may be available. The requirement to develop a new T/HP is not a change from previously stated policies concerning the necessity of treatment team members coming together to develop a new plan when a child's circumstances and/or functioning requires it.

Developing a new T/HP to reflect the need for secure treatment services may not, however, require the completion of a new AOI **if** the AOI was completed within six (6) months of the new T/HP. If an AOI has not been completed in the previous six months, then one should be done along with the new T/HP. Completing the AOI prepares the case manager and other treatment team members for the completion of the T/HP and standardizes the collection of information for the State office. It also provides us with valuable information about a child's functioning at the time we are considering him for secure treatment.

Beginning January 1, 1996, current AOIs and T/HPs will be required for all Willie M. clients on the Secure Waiting List. Listed below are several specific points to keep in mind:

- Any client added to the list must have a current T/HP, and this should be included in the Secure Treatment Packet. The T/HP should be prepared as soon as the treatment team decides that a secure placement is the appropriate choice for the particular client and should also include the services and supports to be provided in the interim before secure treatment may be available. When emergency circumstances require the child to be added to the Secure Waiting List immediately, the T/HP must be completed and forwarded within one month of the receipt of the Secure Treatment Packet in the State office.
- Any client added to the list must have a current AOI, and this should be included in the Secure Treatment Packet. If an AOI has been completed within six months, an additional AOI is not required, and a statement to that effect is all that needs to be included in the Secure Treatment Packet. When emergency circumstances require the child to be added to the Secure Waiting List immediately, the AOI (if needed) must be completed and forwarded within one month of the receipt of the Secure Treatment Packet in the State office.
- For children who remain on the waiting list, a new AOI and T/HP must be prepared as would normally be required (i.e., according to their T/HP schedule). In general, this means that another AOI and T/HP would be required one year from the time the client was added to the Secure Waiting List.
- For children who are currently on the Secure Waiting List and who have not had a current AOI and T/HP prepared, they should be completed and forwarded as soon as possible.

Collecting this information is important to us in the State office for two reasons: First, it enables us to make more informed decisions regarding the evaluation of individual children on the Secure Waiting List and to compare children on the list in order to prioritize admissions to a limited resource. Secondly, this information provides good baseline data about children at a critical point in their treatment. Similar information will be collected by the secure treatment programs at the time they leave secure treatment, and this will allow us to measure the expected gains in functioning.

If you have any questions concerning this policy, please contact your Regional Service Manager.

cc: Management Staff